

PTO/SB/21 (09-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/63,998	RECEIVED CENTRAL FAX CENTER SEP 16 2005
	Filing Date	May 23, 2001	
	First Named Inventor	Burns, et al.	
	Art Unit	2955	
	Examiner Name	Thyen, Vo	
Total Number of Pages in This Submission	Attorney Docket Number	333288-00100	

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Patent Application Fee Determination Record Request for Continued Examination
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Katten Muchin Rosenman LLP		
Signature	<i>John S. Paraguss</i>		
Printed name	John S. Paraguss		
Date	9-16-05	Reg. No.	31,051

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Date	9-16-05

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PTO/SB/17 (12-04v2)

Approved for use through 07/31/2008. CMB 0651-0032

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known Application Number 09/863,996 Filing Date May 23, 2001 First Named Inventor Burns, et al. Examiner Name Huyen, Vo Art Unit 2655 Attorney Docket No. 333288-00100	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		RECEIVED CENTRAL FAX SEP 16 2005	
TOTAL AMOUNT OF PAYMENT (\$) \$905.00			

METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ <input checked="" type="checkbox"/> Deposit Account Deposit Account Number 50-1214 Deposit Account Name Katten Muchin For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	
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FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description						Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
- 20 or HP =		x	=		Fee (\$)		
HP = highest number of total claims paid for, if greater than 20.					Fee Paid (\$)		
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
- 3 or HP =		x	=				
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)			
- 100 =	/ 50 =	(round up to a whole number) x	=				
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Petition for Extension of Time and RCE							
							Fees Paid (\$)
							\$905.00

SUBMITTED BY Signature <i>John S. Panagias</i> Registration No. 31,051 Telephone (312) 902-6200 Name (Print/Type) John S. Panagias Date 9-16-05	
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KATTEN MUCHIN ROSENMAN LLP525 West Monroe Street
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312.902.5200 office 312.902.1061 fax

Facsimile To Mail Stop RCE - Commissioner for Patents	Company USPTO	Fax Number (571) 273-8300	Phone Number RECEIVED CENTRAL FAX CENTER
Date September 16, 2005	Client/Matter Number 333288-00100		SEP 16 2005
From John S. Paniaguas	Attorney Number 32347		
Phone 312.902.5312	Fax 312.577.4532		

Total number of pages, including cover letter: pages
If you do not receive all of the pages, please call: 312.902.5312

16 pages

Comments

RE: Patent Application No.: 09/863,996
Filing Date: May 23, 2001
Inventor: Burns, et al.
Title: Wireless Speech Recognition Tool
Confirmation No.: 1863
Please file the attached:
Transmittal Form (1 p.)
Fee Transmittal Form (1 p.)
Amendment (8 pp.)
Patent Application Fee Determination Record (1 p.)
Request for Continued Examination (1 p.) in duplicate
Petition for Extension of Time (1 p.) in duplicate

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